PTO/SB/05 (08-03)
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UTILITY PATENT APPLICATION **TRANSMITTAL** 

Attorney Docket No.	9060/1(b)			
First Inventor	Scott A. Comeaux			
Title	STERILE SURGICAL TABLE COVER			

(Only for new nonprovisional applications under 37 CFR 1.53(b))				fail Label No.	ER 8248	54685 US				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO:  Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450						
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27.  Specification [Total Pages 27] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description				7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies						
- Claim - Abstra	n(s) act of the Disclosu	re	A.	CCOMPAN	YING AI	PPLICA	HOr	PARIS		
4.	ng(s) (35 U.S.C. claration wly executed (or py from a prior a continuation/div.  DELETION OF Signed statement name in the prior a 1.63(d)(2) and 1.3 lication Data She NUING APPLIC. Howing the title, in unation information:	[Total Sheets	art Unit: 3637  a prior application, from which an oath or declaration is supplied under Box or divisional application and is hereby incorporated by reference.							
		19. CORRESPONI	DENCE AD	DRESS						
	ner Number:	23381		OR	Corre	spondenc	e add	ress below		
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Name (Print/Ty	<del></del> -,			Control of the Contro	= -		`	(303) 333-1470		
Signature	7.7		Registratio	on No. (Attorne	y/Agent)	26,217				
Gigirature	Am	w E. Sittery				Date	April	15, 2004		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
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EEE TOAN	CVII	TTAI	C	Complete if Known			
FEE TRANSMITTAL for FY 2004  Effective 10/01/2003. Patent fees are subject to annual revision.  Applicant claims small entity status. See 37 CFR 1.27	<ul> <li>Application Number</li> </ul>						
for EV	FY 2004  Filling Date Herewith  First Named Inventor Scott A. Comeaux  Examiner Name	for EV 2004					
		First Named Inventor	Scott A. Comeaux				
——————————————————————————————————————			Examiner Name .				
Applicant claims small entity status	s. See 37 C	FR 1.27	Art Unit				
TOTAL AMOUNT OF PAYMENT	(\$)	543	Attorney Docket No.	9060/1(b)			
METHOD OF PAYMENT (chee	ck all that a	(vlaar	FEE CA	ALCULATION (continued)			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)				
Check Credit card Money Other None	3. ADDITIONAL FEES				
✓ Deposit Account:	arge Entity   Sma	all Entity			
Denosit	Fee Fee Fee	, ,, rec Description			
Account   04-1414	Code (\$) Code 1051 130 2051	THE STATE OF THE S			
Number Deposit	1052 50 2052	, , , , , , , , , , , , , , , , , , ,			
Account Name Dorr, Carson, Sloan & Birney, P.C.		cover sheet			
The Director is authorized to: (check all that apply)	1053 130 1053				
Charge fee(s) indicated below Credit any overpayments	· ·	2 2,520 For filing a request for ex parte reexamination			
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 180	04 920* Requesting publication of SIR prior to  Examiner action			
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1809	05 1,840* Requesting publication of SIR after			
to the above-identified deposit account.		Examiner action			
FEE CALCULATION	1251 110 225				
1. BASIC FILING FEE	1252 420 225				
Large Entity Small Entity Fee Fee   Fee Fee Fee Description   Fee Paid	1253 950 225				
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,480 225				
1001 770 2001 385 Utility filing fee 385	1255 2,010 225	55 1,005 Extension for reply within fifth month			
1002 340 2002 170 Design filing fee	1401 330 240	01 165 Notice of Appeal			
1003 530 2003 265 Plant filing fee	1402 330 240	02 165 Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403 290 240	03 145 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1,510 145	51 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 385	1452 110 245	52 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,330 245	53 665 Petition to revive - unintentional			
Fee from	1501 1,330 250	, , , , , , , , , , , , , , , , , , , ,			
Extra Claims below Fee Paid  Total Claims 28 20** = 8 x 9 = 72	1502 480 250				
Independent 5 21 2 43 96	1503 640 250				
Claims 5 - 3" = 2 X 43 = 80 Multiple Dependent	1460 130 146				
	1807 50 18	807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity   Small Entity Fee Fee Fee Fee Fee Description	1806 180 18	306 180 Submission of Information Disclosure Stmt			
Code (\$)   Code (\$)	8021 40 80	221 40 Recording each patent assignment per property (times number of properties)			
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809 770 28	309 385 Filing a submission after final rejection			
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 28	(37 CFR 1.129(a)) 310 385 For each additional invention to be			
1204 86 2204 43 ** Reissue independent claims		examined (37 CFR 1.129(b))			
over original patent	1801 770 280	, , , , , , , , , , , , , , , , , , , ,			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 180	02 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 158	Other fee (specify)				
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic	ic Filing Fee Paid SUBTOTAL (3) (\$)			

SUBMITTED BY		(Complete (if applicable))				
Name (Print/Type)	James E. Pittenger	Registration No. (Attorney/Agent)	26,217	Telephone (303) 333-3010		
Signature	Ama & Sattora			Date	April 15, 2004	

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